

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) National Right to Life Victory Fund | | FEC IDENTIFICATION NUMBER ▼ C C00509893 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|--|--------------------|---|---|
| Full Name of Payee Vivid Ink | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2014 | |
| Mailing Address 11710 Clover Ct | | Amount 1046.37 | |
| City Baton Rouge | State LA | Zip Code 70809 | Transaction ID : E9BBA0ADF4B304D43811 Date of Disbursement or Obligation MM / DD / YYYY |
| Purpose of Expenditure IE-Advertising-Landrieu | | Category/Type | |
| Name of Federal Candidate Mary L Landrieu | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA |
| Calendar Year-To-Date Per Election for Office Sought 15817.73 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------|---|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY | |
| Mailing Address | | Amount | |
| City | State | Zip Code | Date of Disbursement or Obligation MM / DD / YYYY |
| Purpose of Expenditure | | Category/Type | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 1046.37 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 1046.37 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wayne Cockfield

[Electronically Filed]

Date

MM / DD / YYYY
10 / 24 / 2014

Signature